

State of Illinois  
Department of Children and Family Services  
**HOME SAFETY CHECKLIST FOR INVESTIGATION SPECIALISTS**

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| <b>INSTRUCTIONS FOR COMPLETING THE HOME SAFETY CHECKLIST</b> |
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Every year, 120,000 children 14 years of age and younger suffer some form of permanent damage due to unintentional/accidental injuries. Infants and toddlers are at high risk of unintentional injury or death due to their inability to recognize and react to protect themselves from the danger. According to data from the National SAFE KIDS Campaign:

- Accidental, or unintentional, injury is the leading cause of death among children, teens and young adults.
- The five leading causes of accidental injury are drowning, burns, motor vehicle accidents, falls, and poisonings.
- Burns and fires are the fourth most common cause of accidental death in children.
- Nearly 75 percent of all burns in children are preventable.
- Nearly 2,900 adults and children die every year in fires or from other burn injuries.
- The majority of children ages four and under, who are hospitalized for burn-related injuries, suffer from scald burns (65 percent) or contact burns (20 percent).
- Hot tap water burns cause more deaths and hospitalizations than burns from any other hot liquids.

**Fire/burns, motor vehicle traffic accidents, suffocation and accidental falls are the leading causes of unintentional deaths of children under the age of five in Illinois. Numerous Illinois children also die each year as a result of domestic violence.**

While it may be impossible to eliminate all the dangers children encounter in their homes, one of the most important factors in reducing those dangers is parent education. The **Home Safety Checklist**, when properly used with parents and caregivers, provides an effective home safety assessment and educational tool that will assist in promoting the safety of children.

### **WHEN TO COMPLETE THE CHECKLIST**

Investigation Specialists shall complete the **Home Safety Checklist**:

- At the time of an initial investigation when there is an allegation of inadequate shelter, inadequate supervision, substance misuse, inadequate food or environmental neglect.
- Prior to the completion of any formal child abuse or neglect investigation unless there is an open service case.
- When the parent places his or her child with a relative or non-related family as part of a safety plan. The Home Safety Checklist is completed in the child's placement environment.
- Prior to the Department's placement of a child or youth with an unlicensed relative. The Home Safety Checklist is completed in the child's placement environment.
- In cases where an investigation is unfounded at the initial stage but is referred for intact or child services the Home Safety Checklist must be completed prior to the referral.

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Child protective service workers are **not required** to complete the **Home Safety Checklist**:

- When the investigation involves child abuse and neglect in schools.
- When the investigation involves child abuse and neglect in childcare facilities.
- When the report involves multiple perpetrators and children (e.g., mass molestation investigations).
- When the alleged perpetrator does not reside in the home of the involved children (However, a Home Safety Checklist must be completed on the alleged perpetrator's home if minor children reside in the home.).
- In situations when protective custody is taken as the result of a court order, reasons of child safety or any situation where a worker feels threatened.
- When the investigation involves a family with an open service case with the Department.

In situations where the family has an open case with the Department, the Investigation Specialist or the Investigation Specialist Supervisor shall notify the family's assigned intact or permanency worker or the workers supervisor of the subsequent oral report (SOR) within 48 hours after assignment of the investigation. The notification shall include the reminder that the intact or permanency worker must complete a new checklist or re-certify the family's previous checklist within **14 days** of the SOR date and provide the documentation to the Investigation Specialist.

A **Home Safety Checklist waiver** may be granted by the Investigation Specialist Supervisor if there is an SOR and the family does not have an open service case with the Department; and a checklist was completed for the family within 30 days, and the allegation or allegations of the SOR do not involve inadequate shelter, inadequate supervision, substance misuse, environmental neglect, inadequate food, or inadequate clothing. The Investigation Specialist Supervisor must complete a SACWIS supervisory case note documenting the waiver and rationale for the approval.

A **Home Safety Checklist re-certification** may be granted by the Investigation Specialist Supervisor if the checklist was completed within six months of the SOR; and the SOR does not involve an allegation or allegations of inadequate shelter, inadequate supervision, substance misuse, environmental neglect, inadequate food, inadequate clothing; and the Investigation Specialist has completed a walk through of the family's home to confirm that the conditions of the home have not changed. The Investigation Specialist Supervisor must complete a SACWIS supervisory case note documenting the approval for re-certification and the rationale for approval.

**Note: When there is an allegation of inadequate shelter, inadequate supervision, substance misuse, environmental neglect, inadequate food or inadequate clothing the checklist should be completed the time the Safety Determination Form, CFS 1441, is completed.**

## **HOW TO COMPLETE THE CHECKLIST**

The **Home Safety Checklist** addresses eight categories of home safety. Each category is supported by safety standards, literature, and straightforward factual information that should be shared with the parent/caregiver. Use the factual information and literature associated with each category to establish an instructive dialogue to educate the family on safety issues.

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There are three activities required for each standard:

1. Discuss the safety standard with the parent/caregiver;
2. Indicate the presence or absence of the safety standard;
3. Provide the parent/caregiver with five pieces of literature (*PARENTS' GUIDE to Fire Safety for Babies and Toddlers, Back to Sleep, Get water wise...SUPERVISE, Never Shake a Baby!*, and *Violence Prevention*) that you are required to provide the family. Investigation Specialists also have the option of distributing *A Helpful Guide for Parents and Caregivers*. This literature can be ordered from Central Stores through normal channels.

For example, once you have discussed the importance of having a working smoke detector and observed that the family has a smoke detector located near their sleeping areas and the smoke detector works, circle “**Yes**” after the standard: **The home has a working smoke detector located near the family’s sleeping areas.** If the family does not have a working smoke detector or has a smoke detector that does not work, circle “**No**”. A “**No**” response requires a brief explanation in the Comments section.

When the parent/caregiver is provided the fire safety literature, circle “**Yes**” to indicate that the required fire prevention literature was provided. The Sleeping standard also requires a comment when a worker does not observe a crib or bassinette for infants age 1 or younger. Some standards are age specific. For example, the standards that discuss burns may not be applicable to older children. When the standard does not apply circle “**N/A**”.

When a standard requires the observation of a specific item or items (e.g., smoke detectors, small electrical appliances), you are required to complete the task if the item is readily observable. Do not open cabinets or drawers, move furniture or handle dangerous items. On the last page of the checklist there is a section to make additional comments or identify other hazards.

The home safety assessment is a service provided to the children and families served by the Department. In order for the **Home Safety Checklist** to be effective, the responsibility for its completion must be shared with the parent/caregiver. Use the information provided at the top of page one of the instructions to explain the purpose of the assessment, provide the parent/caregiver a copy of the **CFS 2026 or 2026-S** (Spanish adaptation), **Home Safety Checklist for Parents and Caregivers**, to use during the assessment, to take notes on and retain for future reference. The formats of the **CFS 2027** and **CFS2026/2026-S** differ; use the prompts provided on the **CFS 2027** to locate the corresponding **CFS 2026/2026-S** sections. Sign, date and have the parent/caregiver sign the completed assessment. If the parent/caregiver declines the opportunity to complete the checklist, check the declined box and request that the parent/caregiver verify his or her decision by signing the form. If the parent/caregiver refuses to sign the form, document the negative response on the parent’s signature line. Place the completed assessment in the investigative local index file.

**Note: The CFS 2027 does not supersede any of the requirements for the completion of the CFS 1441 or CFS 454, HMR Placement Safety Checklist.**

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Suggest that the family visit the following resources if they have Internet access:

American College of Emergency Physicians, [www.acep.org](http://www.acep.org)  
American Association of Poison Control Centers, <http://www.aapcc.org>  
American Red Cross Health and Safety Services, <http://www.redcross.org>  
National Safe Kids Campaign, <http://www.safekids.org>  
American Human Society, [www.americanhumanesociety.org](http://www.americanhumanesociety.org)  
American Veterinary Medical Association, [www.avma.org](http://www.avma.org)  
Centers for Disease Control and Prevention, [www.cdc.gov](http://www.cdc.gov)  
National Center for Injury Prevention and Control, [www.cdc.gov/injury/index](http://www.cdc.gov/injury/index)

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**FIRE AND BURNS**

Please circle your answers.

*PARENTS' GUIDE to Fire Safety for Babies and Toddler*

Literature Given: Yes No

*A HELPFUL GUIDE for PARENTS and CAREGIVERS*

Literature Given: Yes No

A functioning smoke detector was observed in the home.

Yes No

Comments:

**1. The home has a working smoke detector near the family's sleeping areas.**

Discussed with parent? Yes No

Young children in Illinois are more than three times as likely to die in a residential fire than the rest of the state's population. Working smoke detectors save lives! Instruct the family to change smoke detector batteries when they reset their clocks; **SPRING AHEAD** and **FALL BACK**. This standard corresponds to number 2 on the **CFS 2026/2026-S**.

**2. Preschoolers and younger children do not have access to matches or lighters.**

Discussed with parent? Yes No N/A

**3. The stove oven or burners are not used to heat the home.**

Discussed with parent? Yes No N/A

Forty percent of residential fire related deaths among children are caused by child fire-play. Up to two thirds of child fire-play victims are not the children who were playing with and/or started the fire. Supervision of children will prevent fire-play as well as other accidents. Home heating systems are a leading cause of home fires, and alternative home heating sources such as electric space heaters, kerosene heaters and wood stoves are a major cause of fire deaths. Keep alternative heating sources three feet from combustible materials such as furniture, curtains, blankets, paper, and walls. Never fill a kerosene heater with gasoline or camp stove fuel; both flare-up easily. Only use crystal clear K-1 kerosene. These standards correspond to numbers 6 & 7 on the **CFS 2026/2026-S**.

**4. Pot handles are always turned towards the back of the stove when they are on the stove.**

Discussed with parent? Yes No N/A

**5. Electrical appliances (e.g., hair dryers, curling and clothes irons) are kept out of the reach of younger children.**

Discussed with parent? Yes No N/A

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The majority of scald burns to children, especially among those ages six months to two years, are from hot foods and liquids spilled in the kitchen. Kitchens can be especially dangerous for children during meal preparation. Hot items such as coffee, tea, water, food, pots and pans, and lit cigarettes should never be left on a table, countertops or stove tops within the reach of a child. Parents/caregivers should not hold children while they are cooking. This standard corresponds to numbers 9 and 10 on the **CFS 2026/2026-S**. Children have been burned by appliances they have pulled down onto themselves. Children have also electrocuted themselves by dropping appliances into water. This standard corresponds to number 11 on the **CFS 2026/2026-S**.

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| <b>SLEEPING</b> |
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*Back to Sleep*      Literature Given:    Yes    No

Observed individual crib/bassinet for all infants, age 1 year or younger.    Yes    No

Comments:

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|--|------------------------|-----|----|-----|
| <b>6. The infant sleeps alone in a crib or bassinet.</b>                   | Discussed with parent? | Yes | No | N/A |
| <b>7. The infant does not sleep with toys, stuffed animals or pillows.</b> | Discussed with parent? | Yes | No | N/A |
| <b>8. The infant is placed on his or her back to sleep.</b>                | Discussed with parent? | Yes | No | N/A |

If there is a child under the age of one in the home, the following information must be shared with the parent/caregiver.

Infants should sleep alone in a crib or bassinet. Infants sleeping in adult beds are 20 times more likely to suffocate than infants who sleep alone in cribs. The majority of infants suffocate when another person lays over them; or when they are placed on soft bedding or furniture and their face becomes trapped in the bedding; or they become wedged in a small space such as between a mattress and a wall or between couch cushions.

If the parent/caregiver is without a crib, talk to your supervisor about loaning the family a crib until they can obtain one of their own.

When the infant is in the crib, the sides of the crib must be up; the mattress must be in the low position; the crib must not be placed near a window; window blinds and electrical cords must be out of the reach of the child; pillows, stuffed animals and toys must never be left in the crib with the child. A child must never wear a pacifier on a ribbon or string placed around his or her neck. These standards correspond to numbers 15 and 17 on the **CFS 2026/2026-S**.

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**DROWNING**

*Get water wise.... SUPERVISE*      Literature Given:    Yes    No

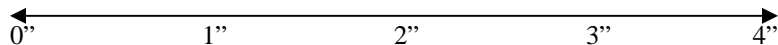
|   |                        |     |    |     |
|---|------------------------|-----|----|-----|
| <b>9. Infants and toddlers are never left alone when near a bath, pool, bucket or toilet.</b> | Discussed with parent? | Yes | No | N/A |
| <b>10. Baby pools are drained when not in use.</b>  | Discussed with parent? | Yes | No | N/A |
| <b>11. Children are always supervised when they are near water.</b>                           | Discussed with parent? | Yes | No |     |

A young child can drown in as little as one inch of water. More than half of the drowning victims under the age of one drown in the bathtub during a brief lapse of supervision by the child's parent or caregiver. A child will lose consciousness within two minutes following submersion. Children must always be supervised when they are near water. These standards correspond to numbers 20 through 22 on the **CFS 2026/2026-S**.

**FALLS**

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|--|------------------------|-----|----|-----|
| <b>12. Furniture that infants and younger children can climb or crawl on is not placed near windows.</b> | Discussed with parent? | Yes | No | N/A |
|--|------------------------|-----|----|-----|

Children are more likely to die or be severely injured from window-related falls than adults. A screen is not strong enough to hold a child who is leaning against it. Screens are designed to keep insects out of the home, not to keep children from falling out the window. Children have fallen from windows that were open as little as four inches. Children crawling or jumping on beds are at risk of falling from open windows. Supervision is the key to keeping children safe from injury. This standard corresponds to number 24 on the **CFS 2026/2026-S**.



**POISON**

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| <b>13. Cleaning products, pesticides, medicine and liquor are kept out of the reach of children.</b> | Discussed with parent? | Yes | No | N/A |
| <b>14. Paint is not chipping or peeling off the walls or woodwork of the home.</b>                   | Discussed with parent? | Yes | No | N/A |

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Poisoning in childhood is frequently due to household cleaning products, medicines, vitamin supplements, plants and cosmetics. Toddlers and preschoolers may be attracted to medicines and vitamins because they resemble candy; cleaning products may look like sweet beverages; cosmetics may smell like fruit or candy. Because young children explore the world by putting things in their mouths, poisoning is a serious risk. Contact the National Poison Control Center Hotline at 1-800-222-1222 if you suspect that your child has been poisoned. The most common way that a child comes into contact with lead is through peeling or chipping paint. If you suspect that the paint in your home contains lead, contact the Illinois Department of Public Health's Childhood Lead Poisoning Prevention Program at 1-800-545-2200. These standards correspond to numbers 26, 27 and 28 on the **CFS 2026/2026-S**.

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| <b>VIOLENCE</b> |
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*Never Shake A Baby!*      Literature Given:    Yes    No

*Violence Prevention*      Literature Given:    Yes    No

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|--|------------------------|-----|----|-----|
| <b>15. The parent/caregiver knows how to calm a crying infant.</b> | Discussed with parent? | Yes | No | N/A |
| <b>16. The parent/caregiver knows never to shake a baby.</b>       | Discussed with parent? | Yes | No | N/A |

The number one reason given by a perpetrator for killing an infant is that the infant would not stop crying. Other reasons perpetrators have given for injuring a child is that the child wet or soiled him or herself or the child was perceived as misbehaving. Instruct the family that they should NEVER, NEVER SHAKE A BABY and that they should remind their children's caretakers that they should never shake a baby. These standards correspond to number 32 on the **CFS 2026/2026-S**.

Recommend that the parent/caregiver do the following when their baby is crying.

- Make sure that the baby is not hungry, wet, hot or cold, sick or in pain.
- Offer the baby a pacifier.
- Rock or walk with the baby.
- Sing or talk to the baby.
- Take the baby for a ride in his or her stroller or walk the baby in a snugly body carrier.
- Play soothing music to the baby.
- Turn on a fan. Babies often like rhythmic noises.
- If the baby is overtired, lower the lights and turn off the television or radio.
- Call a friend or neighbor to baby-sit the child for short periods of time to avoid becoming frustrated and angry.
- As a last resort, gently place the child in his or her crib, close the door and walk away. The parent/caregiver should check on the baby every five or ten minutes until the child stops crying or until the parent/caregiver is calm enough to resume comforting the child.



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| <b>17. Firearms and ammunition stored in the home are kept in separate locked locations.</b> | Discussed with parent? | Yes | No |
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The safest home for children is one without weapons. Parents that keep firearms in the home should always store ammunition and unloaded weapons in separate, securely locked containers. The containers, if possible, should be stored in locations that are unknown and inaccessible to the children. The keys to the containers should always remain under the control of the parents. Fifty percent of all childhood unintentional shooting deaths occur in the home of the victim and nearly forty percent occur in the home of a relative or friend. It is difficult for children under the age of eight to distinguish between real and toy guns. Three-year-old children have the coordination and strength to pull the trigger of many handguns. In Illinois, it is illegal to allow a 14 year old to have access to firearms if that youth does not have a Firearm Owners Identification Card. This standard corresponds to number 33 on the **CFS 2026/2026-S**.

**PETS**

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| 18. The family has pets or other animals in the home.  | Yes | No |     |
| 19. The pet might be classified as a breed that is associated with fighting or other crimes. | Yes | No | N/A |

**According to the Centers for Disease Control and Prevention and the American Veterinary Medical Association:**

- Every 40 seconds someone in the United States seeks medical attention for a dog bite-related injury.
- Dog attacks cause 4.5 million injuries annually, 800,000 of which require medical attention.
- At least 25 different breeds of dogs have been involved in the 238 dog bite-related fatalities in the United States.
- Pit bulls and rottweilers account for over half of these deaths.
- 24% of human deaths involve unrestrained dogs off of their owners' property.
- 58% of human deaths involved unrestrained dogs on their owners' property.

**Dogs can be a danger to children! What parents should know.**

- Children under 15 years of age are the most common victims, making up approximately 70% of all dog bite victims.
- Dog bites are a greater health problem for children than measles, mumps, and whooping cough combined.
- Young boys between the ages of five and nine are the most frequent victims.

**Prevent dog attacks: What can pet owners do?**

- Choose your dog carefully. Select a breed or type of dog that is appropriate for your family and home.
- Socialize your dog. Be sure your dog interacts with all members of the family, as well as people outside the family and with other animals.

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- License your dog, obey leash laws, and take care to properly fence yards. Dogs that are allowed to roam loose outside the yard expand their "territory," and will often defend it aggressively.
- Neuter your dog. Neutering reduces aggression, especially in males. Un-neutered dogs are more than 2.6 times more likely to bite than neutered dogs.
- Train your dog. Basic obedience training is as important for the owner as it is for the dog.
- Maintain your dog's health. Not only is it the right thing for the dog, but it also reduces bite responses caused by pain or irritability.
- Be sure your dog is vaccinated for rabies and other diseases.
- Provide your dog with adequate food, shelter, exercise, and affection. Tethering or chaining dogs makes them feel vulnerable and increases their aggression.
- Don't play aggressive games with your dog.

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| <b>OTHER OBSERVED HAZARDS/OTHER COMMENTS</b> |
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| <b>SIGNATURES</b> |
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Parent's/Caregiver's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Parent/caregiver declined the opportunity to complete the checklist.

Supervisor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Investigation Specialist's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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| <b>WAIVER REQUEST</b> |
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Investigation Specialist's Name:

Supervisor's Name:

Reason for the request:

Waiver Approved:    Yes    No

If no, please explain:

Investigation Specialist's Signature:

Date:

Supervisor's Signature:

Date:

|                         |
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| <b>RE-CERTIFICATION</b> |
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Date of most current Home Safety Checklist:

Date of supervisory approval for the re-certification:

Date of home review for the re-certification:

Investigation Specialist's Signature:

Date:

Supervisor's Signature:

Date:

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